



3800 Municipal Way, Hilliard, OH 43026

www.hilliardohio.gov

614.334.2557

Application for Building Permit

Incomplete applications will not be processed.

It is the responsibility of the homeowner to obtain any required Homeowner's Association Approval.

Expedited services are available: Residential \$275, Commercial \$550. Guarantees a 10 business day turn-around. Fee is due with application.

Certified Street Address: _____

Lot #/Bldg# & Subdivision: _____

Builder/Contractor- Company Name: _____

Applicant/Contact Name: _____

Applicant E-mail Address: _____ Phone#: _____

Owner/Tenant Information: _____

Permit type: ☐ New Build ☐ Addition/Alteration/Tenant Finish ☐ Demolition

☐ Revision/Response to Correction Letter: original permit #

Description of work: _____

Project Cost

\$ Click here
to enter text.

☐ Residential (RCO 2009) ☐ Multi-Family 2-3 units (RCO 2009)
☐ Commercial (OBC 2011) ☐ Multi-Family 4+ units (OBC 2011)

Water & Sewer: (which systems are currently being used?)

☐ Existing Water Tap ☐ Existing Sewer Tap ☐ On site WELL ☐ On site SEPTIC

Separate permits are required for electric wiring, heating and ventilating, plumbing, moving, wrecking, shoring, and sewer systems are needed. Building permits shall not be issued until these permits have been obtained.

The owner of this building and undersigned, do hereby covenant and agree to comply with all the laws of the State of Ohio and the ordinances of this jurisdiction, pertaining to building and buildings, and to construct the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and to the best of my knowledge, the information and statements given on this application, drawings and specifications are to the best of their knowledge true and correct.

To be signed by APPLICANT: _____

Water Line Size: _____ Gross Square Feet: _____

Fire Line Size: _____

☐ Master Metered

☐ A or ☐ B

_____	Initial/General
_____	Plan Exam
_____	Surcharge 1%
_____	Surcharge 3%
_____	Zoning Certificate
_____	Occupancy
_____	Tree Permit
_____	Water Tap
_____	Water Capacity
_____	Sewer Tap
_____	Sewer Cap. (CMI)
_____	Sewer Cap (HIL)

Plan exam deposit:

Amount Collected: _____

Est. PE fee: _____

1%/3%: _____

Permit number assigned:

Inspection Line: 614-334-2466

Call by 3pm for next business day inspection.

Becomes a Building Permit when signed below:

Issuing Authorities Approval & Date

Permit #:
Description:
Route to:
Target Date:

_____	Building Permit Subtotal (includes W&S)
_____	Impact Fee
_____	Fire Line Fee
_____	WTB
_____	Grand Total

Collect Balance Due: